

CLINICAL NOTES AND CASE REPORTS

INTRAVENOUS THERAPY

DESCRIPTION OF INTRAVENOUS OPERATING TABLE

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THE apparatus herein described, and shown in the accompanying illustrations, is an intravenous operating table for use in administering all types of intravenous medication into the antecubital veins.

Its method of operation is as follows: The patient's arm is placed upon the table, with the upper arm in the tourniquet "V" and the wrist secured by the strap. The surgeon then presses down on the foot treadle until the veins are distended, and after cleaning the antecubital space with alcohol, inserts the needle into the vein; he then releases the foot treadle and proceeds to inject the medicament. Thus, with both hands free to manipulate the syringe and needle, the danger of injecting subcutaneously is minimized.

Basically, it is a foot-operated tourniquet that may be raised or lowered for different circumstances, or may be tilted to the proper angle. It can be used at the bedside, in the operating room, or in the office.

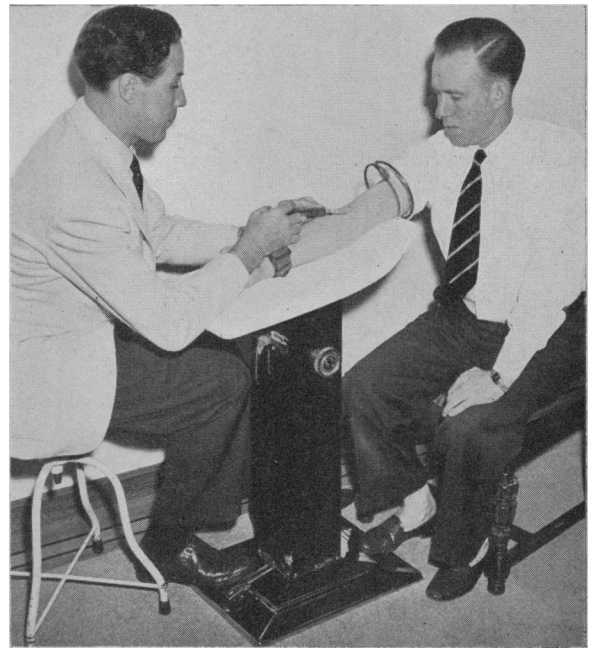


Fig. 1.—Photograph of operating table. Operator has depressed the foot treadle, wrapping tourniquet around the patient's arm. Physician about to insert needle in vein.

It is especially adaptable for giving intravenous anesthesia in that it is often necessary to give repeated doses in long operations.

Also it should prove convenient in luetic clinics

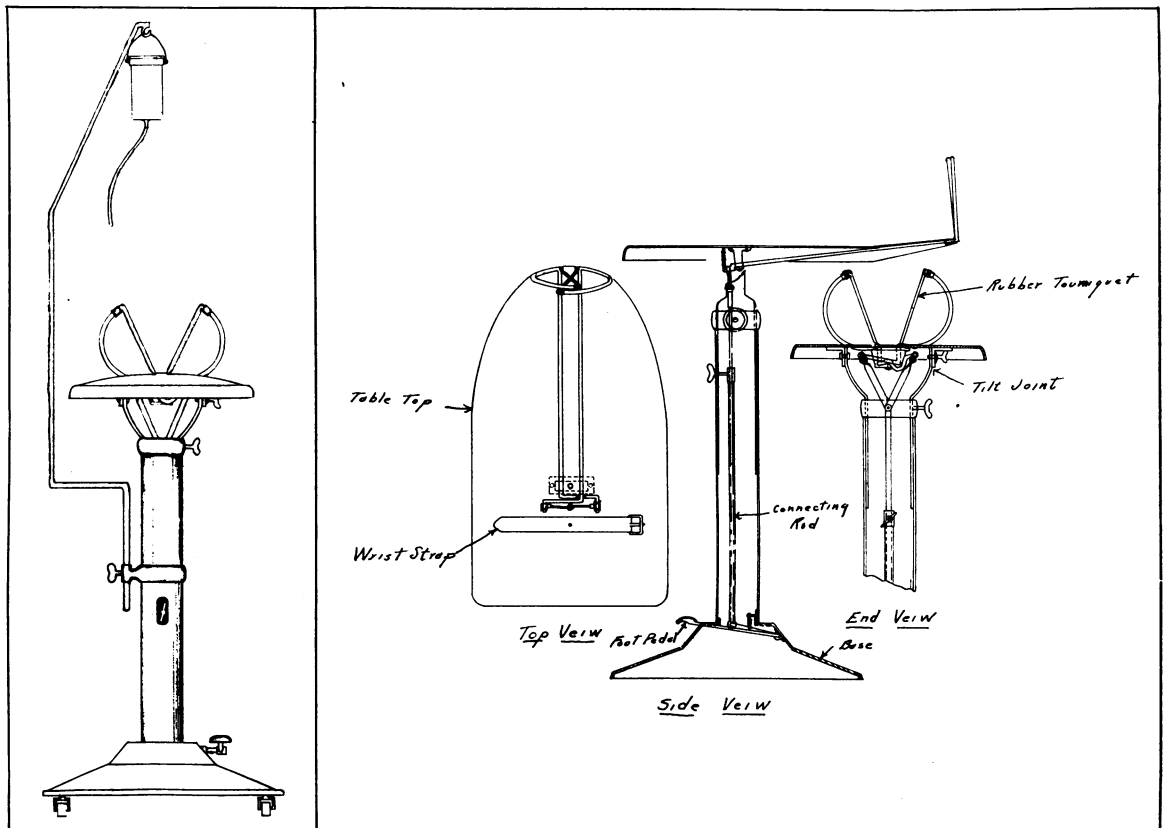


Fig. 2

Fig. 2.—End view of operating table, showing support for container of saline or glucose solution.

Fig. 3

Fig. 3.—Detailed views of operating table, showing working parts.

where large numbers of patients are given intravenous neoarsphenamin daily.

In doing blood transfusions two tables are used, one for the donor and one for the recipient. The treadle control of the tourniquet around the donor's arm may be regulated so that the arterial blood supply comes through freely at intermittent periods.

At the present time most physicians are doing a great deal of intravenous therapy in their offices and, therefore, can appreciate the table in this routine work.

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HIPPOCRATES' APHORISMS*

MOSES SCHOLTZ, M. D.

Arcadia

SECTION SEVEN (Continued)

14. Stupor or delirium,
From a blow on the head,
Is a dangerous symptom
To guard against and dread.
15. Blood-spitting leads
To spitting pus,
And oft to a state
Tuberculous.
16. Diarrhea and phthisis
From pus-spit arise;
But, if the sputum stops,
The patient dies.
17. Inflammation of the liver,
Followed by hiccough,
Threatens to carry
The sufferer off.
18. Fits, set upon
A stupor-state,
Forecast an end
Unfortunate.
19. When erysipelas sets in
On a wound of the cranium,
With a bone open and exposed,
The sick is likely to succumb.
20. When gangrene or suppuration
Occur in erysipelas,
Between Scylla and Charybdis
The sick shall have to pass.
21. When a strong pulsation of a wound
Brings on a hemorrhage,
It is a solid indication
That the sickness's in a danger-stage.
22. A protracted pain
Of abdomen,
Followed by pus,
Is a dangerous omen.
23. When dysentery does ensue
Upon unmixed alvine discharges,
Great dangers for the sick accrue.
24. If, in a case of fractured skull,
With an involvement of the brain,
Delirium does intervene,
The treatment's apt to be in vain.
25. Convulsions, following
A severe purge,
Prepare the way
To the patient's dirge.
26. With severe pains
In the abdomen,
Cold extremities
Are a bad omen.
27. Tenesmus during
A pregnant state,
May a miscarriage
Accelerate.
28. A piece of cartilage,
Nerve or bone,
When once cut off,
Can't grow into one.
29. Incipient edema
Is easily controlled,
If heavy diarrhea
Sets in and keeps its hold.
30. With frothy fluxes
In diarrheal cases,
Seep serous exudations
From the cranial spaces.
31. In fever, if the urine throws
A farinaceous sediment,
It is a sign the illness
Will be a long event.
32. When urine flows thin at first,
And bile's precipitated,
An acute type of the disease
Is thereby indicated.
33. If urine is divided in two parts:
A clear one and a thick,
It is an indication
That the man is very sick.
34. When bubbles show in the urine,
The kidneys are in disrepair;
It also carries a suggestion
That 'twill be a long affair.
35. When urine-scum is found
Both fat and copious,
An acute kidney-lesion
Becomes quite obvious.
36. When these symptoms from the kidneys
Merge with spinal muscles-pain,
An abscess forms outward; but with pains
inside,
The abscess will inward drain.

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(To be concluded)

* For other aphorisms, see CALIFORNIA AND WESTERN MEDICINE, March 1940, page 125; April 1940, page 179; May 1940, page 231; July 1940, page 35; August 1940, page 85; September 1940, page 130; December 1940, page 272; January 1941, page 27; February 1941, page 82; March 1941, page 124; April 1941, page 229; July 1941, page 35; September 1941, page 140; October 1941, page 204.